Fill in this info	rmation to identify your case and thi	Document Page 1 of 19 s filing:		
Debtor 1	Jose G. Sanchez			
Debtor 2		Name Last Name		
(Spouse, if filing)		Last Name Last Name		
United States E		N DISTRICT OF ILLINOIS, EASTERN DIVISION	<u> </u>	
Case number	17-36290			Check if this is an amended filing
Schedun each category, hink it fits best.	Be as complete and accurate as possible ore space is needed, attach a separate sh	on asset only once. If an asset fits in more than one b. If two married people are filing together, both are leet to this form. On the top of any additional pages,	equally responsible for	supplying correct
		ner Real Estate You Own or Have an Interest In		
		ny residence, building, land, or similar property?		
. Do you own o	i have any legal of equitable interest in al	ny residence, building, land, or similar property:		
□ No. Co to B	lort 2			
☐ No. Go to P Yes. Where	art 2. e is the property?			
Yes. Where				
_		What is the property? Check all that apply Single-family home	Do not deduct secure	ed claims or exemptions. Put
Yes. Where		What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property.
Yes. Where	e is the property? Grace St	Single-family home Duplex or multi-unit building	the amount of any se Creditors Who Have	cured claims on Schedule D: Claims Secured by Property.
Yes. Where	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any se Creditors Who Have Current value of the entire property?	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Yes. Where	Grace St ss, if available, or other description	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0	Current value of the portion you own? \$\frac{\text{Current value of the portion you own?}}{325,000.00}\$
Yes. Where	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0 Describe the nature (such as fee simple a life estate), if known	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Sale \$325,000.00 of your ownership interest, tenancy by the entireties, or
Yes. Where	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0 Describe the nature (such as fee simple	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Sale \$325,000.00 of your ownership interest, tenancy by the entireties, or
Yes. Where 1.1 4024 W Street addres Chicago City	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0 Describe the nature (such as fee simple a life estate), if know JTWROS	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Sale \$325,000.00 of your ownership interest, tenancy by the entireties, or
Yes. Where 1.1 4024 W Street addres Chicago City Cook	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0 Describe the nature (such as fee simple a life estate), if know JTWROS Check if this is (see instructions)	Current value of the portion you own? Say
Yes. Where 1.1 4024 W Street addres Chicago City Cook	Grace St ss, if available, or other description IL 60641-3125	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter	the amount of any se Creditors Who Have Current value of the entire property? \$325,000.0 Describe the nature (such as fee simple a life estate), if know JTWROS Check if this is (see instructions)	Current value of the portion you own? Say

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

		Case 17-3	6290	Doc 14		Entered 01/08/18 18:	29:01	Desc Main
De	ebtor 1	Sanchez, Jo	se G.		Document	Page 2 of 19 Case number	(if known)	17-36290
				•		es, other vehicles, and accessorie mobiles, motorcycle accessories	es	
ı	■ No							
	☐ Yes							
_				_			Г	
			•	•	-	n Part 2, including any entries for=>	pages	\$0.00
Pa	rt 3: De	scribe Your Perso	nal and Ho	ousehold Items				
Do	you ow	vn or have any le	egal or eq	uitable interes	t in any of the followin	g items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and fu						ciains of exemptions.
	Example No	es: Major appliand	es, furnitu	ıre, linens, china	a, kitchenware			
	Yes.	Describe					_	
			Genera	al Household	I Goods and Furnis	hings		\$1,000.00
7.	Electron Example		d radios: a	audio. video. ste	reo. and digital equipmer	nt; computers, printers, scanners; mu	usic collect	ions: electronic devices
	□ No				players, games	.,		.,
		Describe						
	— 163.	Describe	Tablet	computer, la	ap top computer, te	evisions, desk top]	
			compu			, .		\$750.00
		bles of value es: Antiques and f collections, m		0 . ,	, or other artwork; books	pictures, or other art objects; stamp	o, coin, or b	aseball card collections; other
	☐ Yes.	Describe						
	Example No	ent for sports an es: Sports, photog instruments			er hobby equipment; bicy	cles, pool tables, golf clubs, skis; ca	noes and k	ayaks; carpentry tools; musical
10	Firearn	ns						
	Examp		, shotguns	s, ammunition,	and related equipment			
	■ No	D						
	⊔ Yes.	Describe						
	Clothes Examp □ No		thes, furs,	leather coats, o	lesigner wear, shoes, ac	cessories		
		Describe						
			Genera	al wearing ap	parel]	\$1,000.00
	Jewelry Examp		elry, costu	ıme jewelry, enç	gagement rings, wedding	rings, heirloom jewelry, watches, ge	ems, gold, s	ilver
	☐ Yes.	Describe						
	_Examp	rm animals oles: Dogs, cats, b	oirds, hors	es				
	■ No □ Yes.	Describe						

Debtor 1	Case 17-36 Sanchez, Jose		Doc 14		01/08/18 ument		Entered 01 age 3 of 19	L/08/18 18:2 9 Case number <i>(if</i>		Desc Main 17-36290
									_	
14. Any ot ■ No	her personal and h	nouseh	old items you o	did not alr	eady list, inc	cludii	ng any health a	aids you did not l	list	
	Give specific inform	nation	••							
									ſ	
	the dollar value of 3. Write that numb							you have attache	ed for	\$2,750.00
Part 4: De	escribe Your Financia	al Assets	ì							
Do you o	wn or have any leg	al or eq	uitable interes	t in any of	f the followir	ng?				Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Exam</i> ■ No	ples: Money you hav	e in you	r wallet, in your	home, in a	safe deposit	box, a	and on hand wh	nen you file your pe	tition	
☐ Yes.										
Exam			other financial ace					edit unions, brokera	age hous	es, and other similar
□ No ■ Yes.					Institution n	name:	:			
		17.1.	Checking A	ccount	Chase Ba		ing 8159			\$460.00
					DNC Bank	l.				
		17.2.	Checking A	ccount	Account I		ing 7012			\$1,500.00
					TCF Bank	k				
		17.3.	Checking A	ccount	Account		ing			\$50.00
	s, mutual funds, or ples: Bond funds, in				firms, money	y marl	ket accounts			
			Institution or iss	uer name:						
joint v	ublicly traded stoc venture	k and ir	nterests in inco	orporated	and unincor	rpora	ted businesse	s, including an in	terest ir	an LLC, partnership, and
■ No □ Yes.	Give specific infor	mation a	about them							
			ne of entity:					% of ownership):	
Negot	nment and corpora tiable instruments ind regotiable instrumen	clude pe	rsonal checks, o	cashiers' c	hecks, promis	ssory	notes, and mor	ney orders.		
	Give specific inform		oout them er name:							
_Exam	ment or pension ac ples: Interests in IR			k), 403(b),	thrift savings	s acco	ounts, or other p	pension or profit-s	haring pl	ans
■ No □ Yes.	List each account s		y. f account:		Institution n	name:	:			
Your s	ty deposits and property of all unused deples: Agreements with	leposits	you have made						npanies,	or others

De	ebtor 1	Sanchez,	Jose G.	Document	Page 4	1 of 19 Case number (if known)	17-36290
	☐ Yes			Institution na	ame or indiv	· vidual:	
23.	Annuiti	es (A contrac	t for a periodic payment of mone	ev to you, either for life	or for a nur	mber of years)	
_0.	■ No □ Yes	•	Issuer name and description.	,, 10, 100, 0111101 101 1110	, o. 101 a 11a.		
24.	26 U.S.0		ation IRA, in an account in a c), 529A(b), and 529(b)(1).	ualified ABLE progr	ram, or unc	ler a qualified state tuition progr	am.
	■ No □ Yes		Institution name and description	on. Separately file the	records of a	ny interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or	future interests in property (other than anything	listed in lir	ne 1), and rights or powers exerc	isable for your benefit
	☐ Yes.	Give specific	information about them				
26.			trademarks, trade secrets, a omain names, websites, procee			greements	
	☐ Yes.	Give specific	information about them				
27.			s, and other general intangible permits, exclusive licenses, coopermits, exclusive licenses, e		oldings, liqu	or licenses, professional licenses	
	_	Give specific	information about them				
M	oney or _l	property owe	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to	you				
	■ No □ Yes.	Give specific i	nformation about them, includin	g whether you already	filed the ref	turns and the tax years	
29.	Family Examp		or lump sum alimony, spousal	support, child suppor	rt, maintena	nce, divorce settlement, property s	settlement
	☐ Yes. (Give specific i	nformation				
30.	Examp	<i>les:</i> Unpaid w	eone owes you ages, disability insurance paymo ans you made to someone els		s, sick pay,	vacation pay, workers' compensati	on, Social Security benefits;
	■ No □ Yes.	Give specific	information				
31.		t s in insuran les: Health, di		savings account (HS.	A); credit, h	omeowner's, or renter's insurance	
	■ No □ Yes. I	Name the insu	ırance company of each policy a	and list its value.			
			Company name:			Beneficiary:	Surrender or refund value:
32.	Any int If you a died.	erest in prop are the benefic	erty that is due you from son iary of a living trust, expect proc	neone who has died eeds from a life insura	ance policy,	or are currently entitled to receive p	property because someone has
	■ No □ Yes	Give specific	information				
	00.	c opoomo					
33.			parties, whether or not you l s, employment disputes, insura			demand for payment	
		Describe eac	h claim				

Deb	tor 1	Sanchez, Jose G.	Document	Page 5 of 1	Case number (if known)	17-36290
34.	Other c	ontingent and unliquidated claims of ev	ery nature, including	counterclaims of	the debtor and rights to s	et off claims
	No					
	Yes.	Describe each claim				
35. /	Any fin	ancial assets you did not already list				
_	No	•				
	Yes.	Give specific information				
36.		he dollar value of all of your entries fron . Write that number here			-	\$2,010.00
Part	5: Des	scribe Any Business-Related Property You O	wn or Have an Interest Ir	n. List any real esta	te in Part 1.	
37. C	o you o	wn or have any legal or equitable interest in	any business-related pre	operty?		
	No. Go	to Part 6.				
	Yes. G	o to line 38.				
Part	6: Des	scribe Any Farm- and Commercial Fishing-Re	elated Property You Owr	or Have an Interes	t In	
ı aıı		ou own or have an interest in farmland, list it in F		TOT TIAVE AIT IIILETES	t III.	
46 I	ייטע א	own or have any legal or equitable inter	rest in any farm- or co	nmercial fishing	-related property?	
40. 1		Go to Part 7.	est in any farin- or co	Jilliler Clar Halling	-related property:	
		Go to line 47.				
Part	7:	Describe All Property You Own or Have an	Interest in That You Did	Not List Above		
		· ·				
53. I		have other property of any kind you did les: Season tickets, country club members				
	Lxamp ■ No	ioc. Codoon totolo, codini y clas members	****P			
	Yes.	Give specific information				
					J	
54.	Add t	he dollar value of all of your entries fron	n Part 7. Write that nu	mber here		\$0.00
					'	
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$325,000.00
56.	Part 2	: Total vehicles, line 5		\$0.00		
57.	Part 3	: Total personal and household items, li	ine 15	\$2,750.00		
58.	Part 4	: Total financial assets, line 36	_	\$2,010.00		
59.		: Total business-related property, line 4		\$0.00		
60.		: Total farm- and fishing-related propert		\$0.00		
61.	Part 7	: Total other property not listed, line 54	+	\$0.00		
62.	Total	personal property. Add lines 56 through 6	61	\$4,760.00	Copy personal property to	tal \$4,760.00
					J	
63.	Total	of all property on Schedule A/B. Add line	⇒ 55 + line 62			\$329,760.00

Desc Main

Official Form 106A/B Schedule A/B: Property page 5

		170611111	en Paue o or 19
Fill in this infor	mation to identify your	case:	
Debtor 1	Jose G. Sanchez		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION
Case number	17-36290		
(if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify the Property You Claim as Exempt
--	---------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che		
4024 W Grace St Chicago IL, 60641-3125 County: Cook Line from Schedule A/B 1.1	\$325,000.00	□■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
General Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,000.00	□■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Tablet computer, lap top computer, televisions, desk top computer Line from Schedule A/B 7.1	\$750.00	□ ■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
General wearing apparel Line from Schedule A/B 11.1	\$1,000.00	■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Chase Bank Account Ending 8159 Line from Schedule A/B. 17.1	\$460.00	□■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 7 of 19

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	PNC Bank Account Ending 7012 Line from Schedule A/B: 17.2	\$1,500.00	■ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	TCF Bank	\$50.00		735 ILCS 5/12-1001(b)
	Account Ending Line from Schedule A/B. 17.3		■ 100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 you No Yes. Did you acquire the property covered No	years after that for cases	filed on or after the date of adjustment.)	

☐ Yes

		Document	Page 8	of 19		
Fill in this informa	ation to identify you	ır case:				
Debtor 1	Jose G. Sanche	27				
20210	First Name	Middle Name	Last Name			
Debtor 2	T. AN	No. 11 No.			.	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS, EAST	ERN DIVISION		
Case number 17	7-36290					
(if known)					☐ Check	if this is an
					amend	led filing
Official Forms	40CD					
Official Form			_			
Schedule I	D: Creditors	Who Have Claims S	Secure	d by Propert	У	12/15
needed, copy the Ad known).		If two married people are filing together t, number the entries, and attach it to th y your property?				
☐ No. Check t	this box and submit th	is form to the court with your other sch	nedules. You	have nothing else to re	port on this form.	
	all of the information b	·				
		GIOW.				
•	Secured Claims	and the same and the same distance of the same dist		Column A	Column B	Column C
for each claim. If mo	re than one creditor has	more than one secured claim, list the credi s a particular claim, list the other creditors i cal order according to the creditor 's name	n Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Wells Farg	jo Hm			¢407.754.00	£225 000 00	
Mortgage Creditor's Name		Describe the property that secures the		\$487,754.00	\$325,000.00	\$162,754.00
Default Do Processing		4024 W Grace St, Chicago, II 60641-3125	-			
	1000 Blue	As of the date you file, the claim is: C apply.	heck all that			
Gentian Ro		☐ Contingent				
	1 55121-7700 City, State & Zip Code	☐ Unliquidated				
Number, Street,	City, State & Zip Code	☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as m	ortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb		☐ Other (including a right to offset) _				
_						
Date debt was incu	rred <u>2004-09</u>	Last 4 digits of account number	er <u>1411</u>			
Welle Ferm	. a. I Ima					
2.2 Wells Farg Mortgage	јо пін	Describe the property that secures th	e claim:	\$81,451.00	\$325,000.00	\$81,451.00
Creditor's Name		4024 W Grace St, Chicago, II 60641-3125				
8480 Stage	ecoach Cir	As of the date you file, the claim is: C	book all that			
Frederick,		apply.	nook all triat			
21701-474		☐ Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as m	ortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Deb	· ·	Statutory lien (such as tax lien, mech	nanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb		☐ Other (including a right to offset)				

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 9 of 19

Debtor 1	Jose G. Sanchez	<u> </u>			Case number (if know)	
	First Name	Middle Name	Last Name			
Date debt	was incurred		Last 4 digits of account number	4001		
Add the de	ollar value of your entr	ies in Column A	on this page. Write that number here	e:	\$569,205.00	
	e last page of your for number here:	m, add the dollar	r value totals from all pages.		\$569,205.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

_	ase 11-30230 D	_	ned 01/00/10 Document	Page 10	-u 01/00/10 10. 1 nf 10	23.01 De	sc main
Fill in this inf	ormation to identify your c		JOC.IIII e III	Faue II	70119		
Debtor 1	Jose G. Sanchez						
Debior 1	First Name	Middle N	ame	Last Name		}	
Debtor 2							
(Spouse if, filing)	First Name	Middle N	ame	Last Name			
United States	Bankruptcy Court for the:	NORTHERN	N DISTRICT OF ILLI	INOIS, EAST	ERN DIVISION		
Case number	17-36290						
(if known)			_				heck if this is an
						a	mended filing
Official Ea	rm 1065/5						
	orm 106E/F	lla a l lavra	l loo o o como al 4	Claima			40/45
	e E/F: Creditors W and accurate as possible. Use						12/15
Schedule G: Exc D: Creditors Wh	ontracts or unexpired leases ecutory Contracts and Unexpi to Have Claims Secured by Pr n Page to this page. If you have known).	ired Leases (Of operty. If more	ficial Form 106G). Do space is needed, cop	not include a by the Part yo	iny creditors with partiall u need, fill it out, numbei	ly secured claims to the entries in the	hat are listed in Schedule boxes on the left. Attach
	t All of Your PRIORITY Un						
	ditors have priority unsecured	d claims agains	st you?				
No. Go	to Part 2.						
☐ Yes.							
	t All of Your NONPRIORIT						
3. Do any cre	ditors have nonpriority unsec	ured claims ag	ainst you?				
☐ No. You	have nothing to report in this pa	art. Submit this f	orm to the court with yo	our other sche	dules.		
Yes.							
unsecured	rour nonpriority unsecured cla claim, list the creditor separately editor holds a particular claim, li	for each claim.	For each claim listed, i	identify what ty	pe of claim it is. Do not lis	t claims already inclu	uded in Part 1. If more
							Total claim
4.1 Hom	e Medical Express Inc		Last 4 digits of acco	unt number	8781		\$100.00
Nonpri	ority Creditor's Name		\ A /		0046.44		
			When was the debt i	incurred?	2016-11		•
	er Street City State Zlp Code		As of the date you fi	le, the claim i	s: Check all that apply		
_	ncurred the debt? Check one.						
	btor 1 only		☐ Contingent				
☐ Del	btor 2 only		☐ Unliquidated				
	btor 1 and Debtor 2 only		☐ Disputed				
	least one of the debtors and and		Type of NONPRIORI	TY unsecured	l claim:		
☐ Ch debt	eck if this claim is for a comm	munity	Student loans	n aut af	rotion o groom and an all	on that you all a con-	
	claim subject to offset?		report as priority claim		ration agreement or divorc	e mat you did not	
■ No	-				g plans, and other similar o	debts	
☐ Yes	S		Other. Specify	Open acco	unt		
							•

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 11 of 19

DCDI	Sanchez, Jose G.		- Case Harriser (Fixnow)	
4.2	Home Medical Express Inc	Last 4 digits of account number	1184	\$93.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017-03	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Open acco	unt	
4.3	Pnc Bank Credit Card	Last 4 digits of account number	7676	\$441.00
	Nonpriority Creditor's Name	When was the debt incurred?	2016-07	_
	PO Box 5570	when was the dept incurred?	2016-07	
	Cleveland, OH 44101-0570			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	I alata	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a claim:	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Revolving	account	
4.4	Shapiro Atty Richard	Last 4 digits of account number	6329	\$198.00
	Nonpriority Creditor's Name	— When was the debt incurred?	2014-03	
	Neverbase Charact City Chata 71a Cada			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан that арріу	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Open acco	unt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 12 of 19

Debtor 1 Sanchez, Jose G.		Case number (f know) 17-36290	
Activity Collection SE 664 N Milwaukee Ave	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Prospect Heights, IL 60070-2300	Last 4 digits of account number	6329	
Name and Address	On which entry in Part 1 or Part 2 or	· _	
Creditors Discount & A	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
415 E Main St		Part 2: Creditors with Nonpriority Unsecured Claims	
Streator, IL 61364-2927	Last 4 digits of account number	8781	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Creditors Discount & A	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
415 E Main St Streator, IL 61364-2927		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Olicator, IL 01304-2327	Last 4 digits of account number	1184	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?	
Pnc Bank, N.A.	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
1 Financial Pkwy Kalamazoo, MI 49009-8003		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	7676	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				To	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				To	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	832.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	832.00

Fill in this info	rmation to identify your	case:		
Debtor 1	Jose G. Sanchez	!		
	First Name	Middle Name	Last Name	-)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	_
Case number	17-36290			
(if known)				☐ Check if this amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

		Documer	nt Page 14 of 19	
Fill in this	information to identify your ca	ase:		
Debtor 1	Jose G. Sanchez			
200101 1	First Name	Middle Name	Last Name)
Debtor 2				Į.
(Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case numb	17-36290			
(if known)				☐ Check if this is an
				amended filing
o	- 400LL			
Official	Form 106H			
Sched	ule H: Your Code	ebtors		12/15
are filing to and numbe case numb	gether, both are equally respo r the entries in the boxes on the er (if known). Answer every qu	onsible for supplying come he left. Attach the Addition uestion.	you may have. Be as complete and accurrect information. If more space is needed and Page to this page. On the top of any not list either spouse as a codebtor.	I, copy the Additional Page, fill it out,
1. DO y	ou have any codeptors? (II yo	ou are ming a joint case, do	not list either spouse as a codebtor.	
☐ No				
Yes				
			perty state or territory? (Community prope Texas, Washington, and Wisconsin.)	erty states and territories include Arizona,
■ No.	Go to line 3.			
☐ Yes	. Did your spouse, former spouse	e, or legal equivalent live wit	th you at the time?	
line 2 a	again as a codebtor only if tha Schedule E/F (Official Form 1	nt person is a guarantor o	pouse as a codebtor if your spouse is fili or cosigner. Make sure you have listed th fficial Form 106G). Use Schedule D, Sche	e creditor on Schedule D (Official Form
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	² Code		creditor to whom you owe the debt dules that apply:
3.1	Beatriz Sanchez		■ Schedule I	D, line 2.1
			☐ Schedule I	E/F, line
			☐ Schedule (G
			Wells Fargo	Hm Mortgage
3.2	Beatriz Sanchez			D, line 2.2
				E/F, line
			☐ Schedule (
			Wells Fargo	Hm Mortgage

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 15 of 19

Eill	in this information to identify your cas	20:					l				
	otor 1 Jose G. Sand										
	otor 2					_					
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILL	INOIS, EASTE	RN						
	te number own) 17-36290		-						ed filing ent show	ving postpetition of	chapter 13
	fficial Form 106l chedule I: Your Inco						_	MM / DD/ `		g	
sup _l spo atta	s complete and accurate as possik olying correct information. If you a use. If you are separated and your ch a separate sheet to this form. Or this possible Employment	re married and not filin spouse is not filing wit	g jointly, h you, do	and your spo not include i	use is 1form	livir atior	ng with y about	you, inclu your spou	de infor ise. If m	mation about your space is ne	our eded,
1.	Fill in your employment information.		Debtor	1				Debtor	2 or nor	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Emp	oloyed				■ Emp	•	d	
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name	CDR I	Disater Relie	ef			The Fe	deral S	Savings Bank	
	Occupation may include student or homemaker, if it applies.	Employer's address	_	Lake St on, IL 60101	-620	1		300 N Chicag		eth St 0607-1143	
		How long employed th	nere?	10 month	s				4 years	5	
Estinunle: If you space	mate monthly income as of the dates you are separated. List monthly gross wages, salary deductions). If not paid monthly, overting the serious and list monthly overting the serious an	e you file this form. If y than one employer, comb. T, and commissions (be culate what the monthly the complex of the commissions)	pine the in	roll	l empl	oyers	For De	person on	For I	s below. If you no Debtor 2 or filing spouse 7,910.59	
3.	Estimate and list monthly overtin				3.	+\$		0.00	+\$.	7.040.50	
4.	Calculate gross Income. Add line	:∠ + IIIIe 3.			4.	\$	1,5	83.89	\$	7,910.59	

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 16 of 19

Debto	or 1	Sanchez, Jose G.	_	Case	number (<i>if known</i>)	17-3629	0	
				Foi	Debtor 1	For Debt		
	Cop	by line 4 here	4.	\$_	1,583.89	\$	7,910.59	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	1,600.99	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_	0.00	\$	1,325.40	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	- \$_	0.00		0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	2,926.39	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,583.89	\$	4,984.20	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_ \$	0.00	\$ \$	0.00	
	8d.	Unemployment compensation	8d.	\$-	0.00	\$	0.00	
	8e.	Social Security	8e.	\$-	1,620.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,620.00	\$	0.00	
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,203.89 + \$	4,984.2	0 = \$ 8	8,188.09
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		3,203.03	7,307.2	-	3,100.03
	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available.	ependen		•		1. +\$	0.00
		If the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain					2. \$	3,188.09
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	?				Combine monthly	
	_	Yes Evnlain:						

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 17 of 19

Fill	in this info	rmation to identify you	ır case:					
Deb	tor 1	Jose G. Sanc	hez		_	Che □	eck if this is: An amended filing	
	otor 2 ouse, if filing	<u> </u>					•	ving postpetition chapter 13 following date:
Unit	ed States B	ankruptcy Court for the:		IERN DISTRICT OF ILLIN	OIS,		MM / DD / YYYY	
	e number nown)	17-36290						
		Form 106J Ile J: Your E	xpen	ses		•		12/1:
Be info	as comple ormation.	ete and accurate as p	ossible. I ded, attac	If two married people are				
Par		escribe Your Househ	old					
1.		joint case?						
	_	io to line 2. Does Debtor 2 live in	a separa	te household?				
		☐ No ☐ Yes. Debtor 2 must	file Officia	al Form 106J-2, <i>Expenses</i> a	for Separate Househ	noldof Debto	or 2.	
2.	Do you l	have dependents?	■ No					
	Do not lis Debtor 2	st Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not s							□ No
	aepenae	nts names.					_	☐ Yes ☐ No
								☐ Yes
								□ No □ Yes
								□ Yes
								☐ Yes
3.	expense	expenses include es of people other that and your dependen	an 🗆	No Yes				
exp	imate you	of a date after the ba	ır bankru	y Expenses ptcy filing date unless yo is filed. If this is a suppl				
val		n assistance and hav		overnment assistance if dit on Schedule I: Your I			Your exp	enses
4.		tal or home ownerships and any rent for the g		ses for your residence. In lot.	clude first mortgage	4.	\$	1,827.00
	If not inc	cluded in line 4:						
	4a. Re	eal estate taxes				4a.	\$	0.00
		operty, homeowner's,				4b.	·	0.00
		ome maintenance, rep omeowner's associatio				4c. 4d.	· ————	0.00
5.				ur residence, such as hon	ne equity loans	5.	·	0.00

Case 17-36290 Doc 14 Filed 01/08/18 Entered 01/08/18 18:29:01 Desc Main Document Page 18 of 19

Deb	otor 1	Sanchez, Jose G.	Case num	ber (if known)	17-36290
6.	Utilit	ies:			
Ů.	6a.	Electricity, heat, natural gas	6a.	\$	340.00
	6b.	Water, sewer, garbage collection	6b.	\$	50.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	260.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	I and housekeeping supplies	 7.	\$	800.00
8.	Child	dcare and children's education costs	8.	\$	0.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	30.00
10.	Pers	onal care products and services	10.	\$	100.00
11.	Medi	cal and dental expenses	11.	\$	410.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	200.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	120.00
14.		itable contributions and religious donations	14.	\$	30.00
15.	15a.	rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	15a. 15b.	·	95.00 0.00
		Vehicle insurance	15c.	\$	148.00
		Other insurance. Specify:	15d.	\$	0.00
16.	Taxe Spec	s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify:	16.	\$	0.00
17.		Ilment or lease payments:			
		Car payments for Vehicle 1	17a.	·	469.00
		Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
	dedu	payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.	_	
20.		r real property expenses not included in lines 4 or 5 of this form or on Sched			0.00
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
0.4		Homeowner's association or condominium dues	20e.	\$	0.00
21.	Otne	r: Specify:	21.	+\$	0.00
22.		ulate your monthly expenses Add lines 4 through 21.		\$	4,879.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$, = ====
		Add line 22a and 22b. The result is your monthly expenses.		\$	4,879.00
23.	Calc	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,188.09
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,879.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	3,309.09
24.	For ex				ase or decrease because of a
	$\square \vee \emptyset$	Explain here:			

otor 1	Jose G. Sanchez			
	First Name	Middle Name	Last Name	_ \
otor 2 use if, filing)	First Name	Middle N		
ted Otatas B		Middle Name	Last Name	-
led States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS, EASTERN DIVISION	
e number	17-36290			
own)				☐ Check if this is an
				amended filing
cial Form	106Dec			
		المامانية الماما		
olalati	on About a	in individual i	Debtor's Schedule	es _{1:}
married peo	ple are filing together,	both are equally responsib		
nust file this ning money o , or both. 18	form whenever you file	bankruptcy schedules or	le for supplying correct information	n. e statement, concealing property, or 50,000, or imprisonment for up to 20
nust file this ning money of to or both. 18	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below	e bankruptcy schedules or connection with a bankrup 19, and 3571.	le for supplying correct information	statement, concealing property, or 150,000, or imprisonment for up to 20
must file this ning money of s, or both. 18 Sign	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below	e bankruptcy schedules or connection with a bankrup 19, and 3571.	ole for supplying correct informatior amended schedules. Making a false tcy case can result in fines up to \$2	statement, concealing property, or 150,000, or imprisonment for up to 20
must file this ning money of state of the st	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo	e bankruptcy schedules or connection with a bankrup 19, and 3571.	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form	statement, concealing property, or 150,000, or imprisonment for up to 20 as?
Sign Did you pay	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below	e bankruptcy schedules or connection with a bankrup 19, and 3571.	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form	statement, concealing property, or 150,000, or imprisonment for up to 20 in services.
must file this ning money of state of the st	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo	e bankruptcy schedules or connection with a bankrup 19, and 3571.	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form	statement, concealing property, or 150,000, or imprisonment for up to 20
must file this ning money of s, or both. 18 Sign Did you pay No Yes. Nat	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo me of person	e bankruptcy schedules or connection with a bankrup 19, and 3571. ne who is NOT an attorney	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form Attac Deck	e statement, concealing property, or 150,000, or imprisonment for up to 20 as a second
must file this ning money of s, or both. 18 Sign Did you pay No Yes. Nat	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo me of person	e bankruptcy schedules or connection with a bankrup 19, and 3571. ne who is NOT an attorney	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form	e statement, concealing property, or 150,000, or imprisonment for up to 20 as a second
must file this ning money of s, or both. 18 Sign Did you pay No Yes. Nat	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo me of person	e bankruptcy schedules or connection with a bankrup 19, and 3571. ne who is NOT an attorney	to help you fill out bankruptcy form Attact Deck	e statement, concealing property, or 150,000, or imprisonment for up to 20 as a second
must file this ning money of s, or both. 18 Sign Did you pay No Yes. Nat Juder penalty hat they are to you go	form whenever you file or property by fraud in U.S.C. §§ 152, 1341, 15 Below or agree to pay someo me of person of perjury, I declare th rue and correct	e bankruptcy schedules or connection with a bankrup 19, and 3571. ne who is NOT an attorney	ole for supplying correct information amended schedules. Making a false tcy case can result in fines up to \$2 to help you fill out bankruptcy form Attac Deck	e statement, concealing property, or 150,000, or imprisonment for up to 20 as a second